



2007

QUARTER #     PASS-THROUGH ENTITY RETURN  
OF MAINE INCOME TAX WITHHELD FROM MEMBERS

\*0706210\*

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Pass-through  
Withholding Account Number:      -      -      2 0A. Number of payees subject to  
pass-through entity withholding. .... A.      ,      ,     Period Covered:      -      -      to      -      -       
MM DD YY MM DD YY

Name and Address:

Name

Address

City

State

ZIP Code

1. Pass-through Entity Withholding for this  
Quarter (from Schedule 2P, line 10) .... 1. \$      ,      ,      .     2. Less payments (from Schedule 1P, line  
5) ..... 2. \$      ,      ,      .     3a. Amount due with this return (if line 1  
is greater than line 2) ..... 3a. \$      ,      ,      .     3b. Overpayment to be refunded (if line 2  
is greater than line 1) ..... 3b. \$      ,      ,      .     

Under penalties of perjury, I certify that the information contained on this return, report and attachment(s) is true and correct.

Date:      Signature:      Title:      Telephone:     Contact person e-mail:      Paid Preparer EIN:      -      -     Maine Payroll Processor License Number:      -      -     

Make check payable to: Treasurer, State of Maine

Mail return and check to: Maine Revenue Services, P.O. Box 9118, Augusta, ME 04332-9118

**For the Third Quarter Only: please check if applicable:**

I file my return electronically or my return is prepared by a tax preparer and I do not need Maine tax forms mailed to me next year.

**CANCELLATION NOTICE**4. Check this box and complete the following section if your business is discontinued or the requirement to withhold permanently ceases ..... ☐Reason for Cancellation:       
    Business Sold to Name:     Last Payroll Date:      -      -       
MM DD YYBusiness Sold to Address:     Date Sold:      -      -       
MM DD YYTelephone:     **Note:** Use the Name and Address Change Form (Form 941/C1C-ME) to change your business name or address. This form is available at [www.maine.gov/revenue](http://www.maine.gov/revenue) (select "Forms, Publications & Applications" link, then select "Pass-Through Entity Withholding").Office use only      PWD



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Period Covered: MM - DD - YY to MM - DD - YY

### Reconciliation of 900ME Voucher Payments or Electronic Payments of Pass-through Entity Withholding

	Date	Payment Amount
	<b>Subtotal C</b>	

Total (Enter on Form 941P-ME, line2) ....\$            ,            ,            .

# SCHEDULE 2P (FORM 941P- ME Loose) 2007



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\*0706211\*

Name: \_\_\_\_\_  
 Pass-through  
 Withholding  
 Account No.: \_\_\_\_\_ 2 0

This page contains (check one):

☐

Individuals with  
social security numbers

☐

Entities with federal  
employer ID numbers

Period Covered: \_\_\_\_\_ to \_\_\_\_\_  
 MM DD YY MM DD YY

## Schedule 2P - Pass-through Entity Withholding Listing

6. Name of Member (Last, First, MI)	7. Social Security Number	8. Maine Income Tax Withheld during the Quarter
a. _____	_____ - _____ - _____	\$ _____ , _____ . _____
b. _____	_____ - _____ - _____	\$ _____ , _____ . _____
c. _____	_____ - _____ - _____	\$ _____ , _____ . _____
d. _____	_____ - _____ - _____	\$ _____ , _____ . _____
e. _____	_____ - _____ - _____	\$ _____ , _____ . _____
f. _____	_____ - _____ - _____	\$ _____ , _____ . _____
g. _____	_____ - _____ - _____	\$ _____ , _____ . _____
h. _____	_____ - _____ - _____	\$ _____ , _____ . _____
i. _____	_____ - _____ - _____	\$ _____ , _____ . _____
j. _____	_____ - _____ - _____	\$ _____ , _____ . _____
k. _____	_____ - _____ - _____	\$ _____ , _____ . _____
l. _____	_____ - _____ - _____	\$ _____ , _____ . _____
m. _____	_____ - _____ - _____	\$ _____ , _____ . _____
n. _____	_____ - _____ - _____	\$ _____ , _____ . _____
o. _____	_____ - _____ - _____	\$ _____ , _____ . _____
p. _____	_____ - _____ - _____	\$ _____ , _____ . _____
q. _____	_____ - _____ - _____	\$ _____ , _____ . _____
r. _____	_____ - _____ - _____	\$ _____ , _____ . _____
s. _____	_____ - _____ - _____	\$ _____ , _____ . _____
t. _____	_____ - _____ - _____	\$ _____ , _____ . _____
u. _____	_____ - _____ - _____	\$ _____ , _____ . _____
v. _____	_____ - _____ - _____	\$ _____ , _____ . _____
w. _____	_____ - _____ - _____	\$ _____ , _____ . _____

9. Total on this page.....9. \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

10. Total for ALL pages (Enter here and on Form 941P-ME, Line 1).....10. \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_